

1999 SENATE BILL 136

1 **AN ACT** *to amend* 40.51 (8), 40.51 (8m), 60.23 (25), 66.184, 111.91 (2) (n), 120.13
2 (2) (g), 185.981 (4t) and 185.983 (1) (intro.); and *to create* 609.88 and 632.895
3 (14) of the statutes; **relating to:** requiring insurance coverage of certain
4 immunizations for children.

Analysis by the Legislative Reference Bureau

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

5 **SECTION 1.** 40.51 (8) of the statutes is amended to read:
6 40.51 **(8)** Every health care coverage plan offered by the state under sub. (6)
7 shall comply with ss. 631.89, 631.90, 631.93 (2), 632.72 (2), 632.746 (1) to (8) and (10),
8 632.747, 632.748, 632.85, 632.853, 632.855, 632.87 (3) to (5), 632.895 (5m) and (8) to
9 ~~(13)~~ (14) and 632.896.
10 **SECTION 2.** 40.51 (8m) of the statutes is amended to read:

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1 40.51 **(8m)** Every health care coverage plan offered by the group insurance
2 board under sub. (7) shall comply with ss. 632.746 (1) to (8) and (10), 632.747,
3 632.748, 632.85, 632.853, 632.855 and 632.895 (11) to ~~(13)~~ (14).

4 **SECTION 3.** 60.23 (25) of the statutes is amended to read:

5 60.23 **(25)** SELF-INSURED HEALTH PLANS. Provide health care benefits to its
6 officers and employes on a self-insured basis if the self-insured plan complies with
7 ss. 631.89, 631.90, 631.93 (2), 632.746 (10) (a) 2. and (b) 2., 632.747 (3), 632.85,
8 632.853, 632.855, 632.87 (4) and (5), 632.895 (9) and (11) to ~~(13)~~ (14) and 632.896.

9 **SECTION 4.** 66.184 of the statutes is amended to read:

10 **66.184 Self-insured health plans.** If a city, including a 1st class city, or a
11 village provides health care benefits under its home rule power, or if a town provides
12 health care benefits, to its officers and employes on a self-insured basis, the
13 self-insured plan shall comply with ss. 49.493 (3) (d), 631.89, 631.90, 631.93 (2),
14 632.746 (10) (a) 2. and (b) 2., 632.747 (3), 632.85, 632.853, 632.855, 632.87 (4) and (5),
15 632.895 (9) to ~~(13)~~ (14), 632.896, 767.25 (4m) (d), 767.51 (3m) (d) and 767.62 (4) (b)
16 4.

17 **SECTION 5.** 111.91 (2) (n) of the statutes is amended to read:

18 111.91 **(2)** (n) The provision to employes of the health insurance coverage
19 required under s. 632.895 (11) to ~~(13)~~ (14).

20 **SECTION 6.** 120.13 (2) (g) of the statutes is amended to read:

21 120.13 **(2)** (g) Every self-insured plan under par. (b) shall comply with ss.
22 49.493 (3) (d), 631.89, 631.90, 631.93 (2), 632.746 (10) (a) 2. and (b) 2., 632.747 (3),
23 632.85, 632.853, 632.855, 632.87 (4) and (5), 632.895 (9) to ~~(13)~~ (14), 632.896, 767.25
24 (4m) (d), 767.51 (3m) (d) and 767.62 (4) (b) 4.

25 **SECTION 7.** 185.981 (4t) of the statutes is amended to read:

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1 185.981 **(4t)** A sickness care plan operated by a cooperative association is
2 subject to ss. 252.14, 631.89, 632.72 (2), 632.745 to 632.749, 632.85, 632.853, 632.855,
3 632.87 (2m), (3), (4) and (5), 632.895 (10) to ~~(13)~~ (14) and 632.897 (10) and chs. 149
4 and 155.

5 **SECTION 8.** 185.983 (1) (intro.) of the statutes is amended to read:

6 185.983 **(1)** (intro.) Every such voluntary nonprofit sickness care plan shall be
7 exempt from chs. 600 to 646, with the exception of ss. 601.04, 601.13, 601.31, 601.41,
8 601.42, 601.43, 601.44, 601.45, 611.67, 619.04, 628.34 (10), 631.89, 631.93, 632.72
9 (2), 632.745 to 632.749, 632.775, 632.79, 632.795, 632.85, 632.853, 632.855, 632.87
10 (2m), (3), (4) and (5), 632.895 (5) and (9) to ~~(13)~~ (14), 632.896 and 632.897 (10) and
11 chs. 609, 630, 635, 645 and 646, but the sponsoring association shall:

12 **SECTION 9.** 609.88 of the statutes is created to read:

13 **609.88 Coverage of immunizations.** Managed care plans are subject to s.
14 632.895 (14).

15 **SECTION 10.** 632.895 (14) of the statutes is created to read:

16 632.895 **(14)** COVERAGE OF IMMUNIZATIONS. (a) In this subsection:

17 1. “Appropriate and necessary immunizations” means the administration of
18 vaccine that meets the standards approved by the U.S. public health service for such
19 biological products against at least all of the following:

20 a. Diphtheria.

21 b. Pertussis.

22 c. Tetanus.

23 d. Polio.

24 e. Measles.

25 f. Mumps.

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1 g. Rubella.

2 h. Hemophilus influenza B.

3 i. Hepatitis B.

4 j. Varicella.

5 2. “Dependent” means a spouse, an unmarried child under the age of 19 years,
6 an unmarried child who is a full-time student under the age of 21 years and who is
7 financially dependent upon the parent, or an unmarried child of any age who is
8 medically certified as disabled and who is dependent upon the parent.

9 (b) Except as provided in par. (d), every disability insurance policy, and every
10 self-insured health plan of the state or a county, city, town, village or school district,
11 that provides coverage for a dependent of the insured shall provide coverage of
12 appropriate and necessary immunizations, from birth to the age of 6 years, for a
13 dependent who is a child of the insured.

14 (c) The coverage required under par. (b) may not be subject to any deductibles,
15 copayments or coinsurance under the policy or plan. This paragraph applies to a
16 managed care plan, as defined in s. 609.01 (3c), only with respect to appropriate and
17 necessary immunizations provided by providers participating, as defined in s. 609.01
18 (3m), in the plan.

19 (d) This subsection does not apply to any of the following:

20 1. A disability insurance policy that covers only certain specified diseases.

21 2. A disability insurance policy that covers only hospital and surgical charges.

22 3. A health care plan offered by a limited service health organization, as defined
23 in s. 609.01 (3), or by a preferred provider plan, as defined in s. 609.01 (4), that is not
24 a managed care plan, as defined in s. 609.01 (3c).

25 4. A long-term care insurance policy, as defined in s. 600.03 (28g).

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1 5. A medicare replacement policy, as defined in s. 600.03 (28p).

2 6. A medicare supplement policy, as defined in s. 600.03 (28r).

3 **SECTION 11. Initial applicability.**

4 (1) This act first applies to all of the following:

5 (a) Except as provided in paragraphs (b) and (c), disability insurance policies
6 that are issued or renewed, and self-insured health plans that are established,
7 extended, modified or renewed, on the effective date of this paragraph.

8 (b) Disability insurance policies covering employes who are affected by a
9 collective bargaining agreement containing provisions inconsistent with this act
10 that are issued or renewed on the earlier of the following:

11 1. The day on which the collective bargaining agreement expires.

12 2. The day on which the collective bargaining agreement is extended, modified
13 or renewed.

14 (c) Self-insured health plans covering employes who are affected by a collective
15 bargaining agreement containing provisions inconsistent with this act that are
16 established, extended, modified or renewed on the earlier of the following:

17 1. The day on which the collective bargaining agreement expires.

18 2. The day on which the collective bargaining agreement is extended, modified
19 or renewed.

20 **SECTION 12. Effective date.**

21 (1) This act takes effect on the first day of the 6th month beginning after
22 publication.

23

(END)